Delaware Trauma System Committee Meeting

Public Health Training Center - Dover Delaware

June 1, 2016 12:30 – 2:15 PM

Members Present: E. Alexander, J. Brennan, K. Collison, D. Eberly, J. Hammond, D. Hochstuhl, M. Jadali, E. Johnson, D. Jones, L. Jones, B. King, M. Lamborn, M. Mitchell, P. Shavack, J. Whaley

Alternates/Guests Present: K. Boyer, K. Bradley, M. Cipolle, D. Curtis (phone), L. Ebeling, K. Green-O'Shaunessy, M. Griffin, M. Holland, N. Khare, M. LeNoir, D. Matwiejewicz, J. McCue, S. Megee-Snyder, J. Pirrung, M. Pragg, N. Tyndall (phone)

Staff Present: M.S. Jones, S. Murphy, G. Tinkoff, R. Megargel, A. Fulton

Topics Discussion		Information/Action Plan			
	<u>Leader</u>				
I. Welcome and	M. Cipolle	The meeting was called to order at 12:34 p.m.			
Introductions)				
A. Minutes	M. Cipolle	The February minutes were accepted as written.			
II. New Business					
A. System Updates	L. Jones C. Faedtke J. Pirrung	Joan Pirrung is the new Director of Trauma Services at Christiana and Wilmington campuses; K. Green-O'Shaunessy is Trauma Program Manager at Christiana; Mary Lamborn is now full-time Trauma Program Manager at the Wilmington campus. Lloyd Massey is the new Christiana Care LifeNet Aviation Program Director. The Trauma Symposium was held in May and received a lot of positive feedback.			
B. Other - American College of Surgeons (ACS) TQIP (Trauma Quality Improvement Program) for Level 3 Trauma Centers	D. Curtis J. Whaley B. King D. Eberly D.Hochstuhl M.S. Jones M. Cipolle Dr. Tinkoff	Level 3 Trauma Centers are now required by the ACS to participate in TQIP as a condition of verification. Cost is \$7000+ per year, plus registry fees to Digital Innovation of \$1000 to possibly \$4500 per year. These added costs are concerns for our smaller Level 3 Centers. There is also additional time required of the Registry staff which increases costs for the hospitals. The ACS Verification Review Committee (VRC) thinks that benchmarking is necessary and that the TQIP process will ultimately provide better evaluation of the quality of Trauma Center patient care. They expect that eventually ACS site visits will focus more on TQIP results and less on chart review. There has also been consideration to lengthening the ACS verification period in the future based on use of TQIP in the reviews. Other vendors did not step up with programs so ACS moved forward. The quarterly TQIP reports have been helpful to the larger Level 1 centers; the risk adjustments are extremely robust. Dr. Cipolle did not think the Value Institute at this time could serve as an alternative to the ACS program. There are some regional/state programs that receive TQIP reports, and there are TQIP subcommittees focused specifically on that area, on Level 3's, and on pediatric centers. The concerns of our Level 3 TC's will be taken to the ACS TQIP Committee in November by Dr. Tinkoff, but changes will most likely not occur. Legislative funding support, support from healthcare insurers, or grants, possibly through the Value Institute, are funding mechanisms that should be considered.			
III. Unfinished Business and Reports		or grants, possior, anough the value institute, are funding incommissing that should be considered.			
A. Unfinished Business					

1. Trauma System funding	E. Johnson	Trauma System Committee representatives met with the Delaware Healthcare Association Policy
legislation		Committee in April and outlined the issue of, and need for, Trauma System funding. The committee members were interested in hearing about the successes of the Trauma System in terms of decreased mortality rate, and were receptive to the concerns about the projected future growth in patient volume. They understood that the hospitals are now operating at near maximum capacity. Four action steps were developed: 1) Do a Trauma System needs assessment and/or gap analysis to identify specific system areas in need of support; 2) Develop a more accurate method of determining trauma-related hospital costs; 3) Review information on ways other states are funded and how they distribute the funds; 4) Move the anniversary event to the Fall so that more legislators may attend. Legislators need to be made aware of what the Trauma System has accomplished; all of them should be invited to the event. The Policy Committee was open to the idea of future Trauma System funding legislation efforts.
2. Trauma System 20 th	M. S. Jones	The event is scheduled tentatively for Tuesday, October 11 at Legislative Hall, 11:00 AM to 12 noon.
Anniversary		The focus will be both the decrease in mortality brought about by the Trauma System and also those who have continuously worked for those 20 years on development of the Trauma System. A volunteer from each hospital is requested to serve on an event planning committee.
3. Other - National Highway Transportation Safety Administration EMS site visit	M.S. Jones	This 3-day visit was May 24-26. The review has a set format covering 11 aspects of EMS Systems. Leaders in those areas of Delaware's EMS System presented to the team of five EMS reviewers from other states, in addition to providing written responses to pre-review questions. A formal report will be generated, and will include recommendations for the growth and further development of the components and the EMS System as a whole. The report is expected in about 6 weeks.
B. Designation Committee		
1. 2016 site visits	M. Mitchell	Nanticoke had a positive review in May. ACS reports are now taking 14-16 weeks to be received. Nemours/A. I. duPont Hospital will have their ACS site visit October 13-14. Saint Francis Healthcare and Wilmington Hospitals are working toward state provisional Level 3 Trauma Center designations.
C. Trauma System Quality E	valuation Com	
1. Trauma System Registry data	G. Tinkoff	Dr. Tinkoff presented a re-analysis of 2000-2014 Trauma System Registry data, based on the analysis done by Nemours' Delaware Valley Government Relations staff. There was less than a 21% increase in growth in the total population during this timeframe, while there was a 151% increase in the age 65+ population. During the same time the increase in total trauma visits was 185% as compared to a 301% increase in the age 65+ trauma population. While the number of geriatric trauma patients has increased, their mortality has decreased from 6.6% to 3.5%, and length of stay has decreased by one day. This research has been accepted by the American Association for the Surgery of Trauma (AAST) for presentation at their next meeting. The improved outcomes in this difficult group of patients demonstrate again the excellent work done by the Delaware Trauma System.
D. Networking Highlights		
1.State EMS Medical Director	R. Megargel	The Medical Directors have just finished their review of standing orders. There were no significant changes to the trauma orders. The NHTSA review team strongly supported Delaware's standing orders, as well as the EMS system overall.

2. Office of EMS	A. Fulton	NHTSA provided a very diverse team of reviewers, as well as federal program representatives, for the Delaware site visit. Topics covered were Regulation and Policy, Resource Management, Human Resources/Training, Transportation, Facilities, Communications, Public Info/Education, Medical				
		Direction, Trauma Systems, Evaluation, and Preparedness. Del Tech was noted for producing some of the best paramedics in the country with a 100% pass rate for the National Registry exam. The				
		reviewers stated again, as in previous reports, that the Trauma System is in critical need of funding.				
3. Public Health Preparedness		No report.				
4. Office of Highway Safety	M.S. Jones	No report. A recent OHS data report was distributed.				
(OHS)	for J.Simpler					
5 . Injury Prevention	K. Boyer	CCHS : Total programs provided this fiscal year have included 181 Think First for Teens programs, 18				
		Think First for Kids programs, 39 driving simulator demonstrations, and 31 senior fall prevention				
		programs. Christiana now provides the Matter of Balance senior fall prevention programs. C. Molins,				
		Violence Prevention Coordinator, did 50 Choice Road and 9 You Only Live Once programs, featuring a				
		trauma resuscitation reenactment filmed in the Christiana Hospital simulation lab.				
	J. Hammond	Safe Kids Delaware: Safe Kids' Sussex County subcommittee participated in EMS Day in Bethany on				
	J. McCue	May 21 and is holding a Safe Kids public education event at the Lewes Lowes on June 25. Safe Kids				
		also participates in the Safe Summer Day at Brecknock Park in Camden, which is June 11. The Safe				
		Kids Delaware Childhood Injury Prevention Conference is June 21 in the Cheswold Fire Company hall.				
		Safe Kids' New Castle County subcommittee is developing a safety station program. Each station will teach children a skill such as fire safety, how to call 911, safety around strange dogs, or bike safety.				
		This program is in partnership with the Coalition for Injury Prevention, with some funding support from				
		the EMSC program. It is hoped that the program will be able to be used in all three counties. Children				
		will earn a certificate and badge after completing all the stations.				
	D. Curtis	The Coalition for Injury Prevention's Falls Team met at the Easter Seal Society to learn about their				
		resources. Fall Prevention Awareness Day is September 21, the first day of Fall. The Falls Team will				
		promote public awareness with media releases, a Governor Proclamation, and wearing yellow ribbons.				
6 . DE ACS- Committee on	S. Murphy	ACS-COT: Delaware attendees voiced concerns over the cost of the TQIP product in recent Region 3				
Trauma & DE Chapter,		COT and in Pediatric TQIP meetings.				
American Trauma Society	D. Hochstuhl	ATS: Met in conjunction with the DE COT in April. Members want to work on a statewide project				
		such as something around Trauma Survivor's Day in May each year.				
7. DEMSOC	S. Murphy	Recent topics have been related to discussion of the funding needs of the trauma and EMS systems.				
8. DPH Office of Rural Health	K. Collison	The Delaware Rural Health Conference is June 21 at Dover Downs. Information flyers are available.				
9. Brain Injury	J. Hammond	The donor driver license/ID designation rate in Delaware is currently 51%. The national donor				
Association/TBI/ OTDAB		designation rate for 2013 was 44% (Donate Life America statistic). The annual Delaware Donor Dash				
		is August 6 th at the Riverfront in Wilmington.				
		The Brain Injury Association 5K Walk/Run will be September 5 at Wild Quail Golf Club.				
10. TSC member agencies	B. King	The Delaware Burn Camp will be held at Camp Barnes August 8-13.				
	M. LeNoir	Saint Francis will be involved with Urban Promise for the third year.				
Adjourn/Next Meeting	2:13 p.m.	Wednesday, September 14, 12:30, Public Health Training Center, Edgehill Shopping Center, Dover				

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